

Administration of the Child Care Assistance Program

2020-2021 St. Louis County and Tribal Child Care Fund Plan

Administration of the Child Care Assistance Program

Background: Counties and tribes must submit a biennial Child Care Fund Plan to the commissioner. Child Care Assistance Program (CCAP) rules and laws allow counties and tribes to establish some local policies and procedures. These local policies and procedures, when included in this plan and approved by the commissioner, are considered county/tribal policy and are used to support agency decisions during appeals. The Department of Human Services (DHS) will review and approve County and Tribal Child Care Fund Plans. Counties and tribes will receive approval letters for their Child Care Fund Plans from the commissioner of DHS. This plan period begins on January 1, 2020.

Minnesota Statute, section 119B.08, subdivision 3

Steps to complete the plan process:

Step One – Review the plan

Review this plan to make sure you understand what's being asked. Determine if there are changes to policies or procedures compared to previous plans, or if there are new policies or procedures. Involve other staff as needed.

Note: New questions were added and questions may have been re-ordered, changed, or removed.

Step Two – Draft the plan responses

Step Three – Inform or involve stakeholders

DHS encourages counties and tribes to develop optional policies for the Child Care Assistance Program in coordination with local child care stakeholders. This may include: parents, child care providers, culturally specific service organizations, Child Care Aware agencies (formerly known as child care resource and referral agencies), interagency early intervention committees, potential collaborative partners and agencies involved in the provision of care and education to young children. Consult with other agency staff such as fraud investigators and income maintenance and employment services staff.

Step Four – Share the draft plan

Prior to submission, you must make copies of the proposed plan available to the public and allow sufficient time for public review and comment. See question II.D of this plan; describe methods used to make the plan available to the public, particularly to those members listed in II.D.

Step Five – Submit the plan by the deadline

Submit the plan by the deadline, and note these guidelines:

- Identify all optional county/tribal Child Care Assistance Program policies; see question IX.A.
- Do not answer questions by stating that the reviewer should refer to a previous plan.
- Submit any agency-developed forms that have not been previously submitted and approved. Do not submit DHS and MEC² standardized forms. Refer to the DHS memo announcing this plan for a list of DHS created documents that are required for CCAP.
- Provide an answer to each question. Incomplete plans will be returned.

Amendments to plans

A county or tribe may amend their Child Care Fund Plan at any time, but the commissioner must approve the amendment before it becomes effective. If approved by the commissioner, the amendment is effective on the date requested by the agency unless a different effective date is set by the commissioner. Plan amendments must be approved or denied by the commissioner within 60 days after receipt of the amendment request. The department reserves the right to direct a county or tribe to amend its child care fund plan if the plan is no longer in compliance with Minnesota Statutes, Minnesota Rules, or federal law.

Minnesota Rules, part 3400.0150, subpart 3

Amendments include changes in county/tribal contacts, county/tribal optional policies, new or revised forms and notices. Amendments can be sent in letter form or by email to the agency's CCAP policy specialist.

Return completed plans by **Friday, August 30, 2019** to:

DHS.CCAP@state.mn.us

Administration of the Child Care Assistance Program

I. Child Care Assistance Program contacts

A. County or tribal agency

COUNTY OR TRIBE NAME St. Louis	GENERAL PHONE NUMBER 218-726-2000	EXTENSION	GENERAL FAX NUMBER 218-733-2992
AGENCY'S FULL NAME St Louis County Public Health and Human Services		CCAP INTAKE PHONE NUMBER 218-726-2400	EXTENSION
MAIN OFFICE STREET ADDRESS 320 W 2nd Street	CITY Duluth	ZIP CODE 55802	
MAIN OFFICE MAILING ADDRESS (if different)	CITY	ZIP CODE	

B. County or tribal branch office (if applicable)

BRANCH NAME St Louis County PHHS	GENERAL PHONE NUMBER 218-471-7137	EXTENSION	GENERAL FAX NUMBER	CCAP INTAKE PHONE NUMBER 218-726-2400	EXTENSION
ADDRESS OF BRANCH OFFICE Northland Office Building, 307 South 1st Street		CITY Virginia		ZIP CODE 55792	
BRANCH NAME St Louis County PHHS	GENERAL PHONE NUMBER 218-262-6000	EXTENSION	GENERAL FAX NUMBER	CCAP INTAKE PHONE NUMBER 218-726-2400	EXTENSION
ADDRESS OF BRANCH OFFICE Hibbing annex, 1814 East 14th Avenue		CITY Hibbing		ZIP CODE 55746	

C. Agency contact people

This contact information is required to be completed and will be used by DHS staff to communicate with counties or tribes.

1. County or tribal CCAP administrative contact

Who is your primary contact for the Child Care Assistance Program? This contact will receive policy bulletins, memos, and other high level communications. You may have more than one administrative contact.

<input checked="" type="radio"/> Mr. <input type="radio"/> Mrs. <input type="radio"/> Ms.	FIRST NAME Dustin	LAST NAME Letica		
TITLE Director of Economic Services and Supports		PHONE NUMBER 218-726-2021	EXTENSION	FAX NUMBER 218-733-2976
EMAIL ADDRESS leticad@stlouiscountymn.gov		SIR EMAIL ADDRESS X169230@cty.dhs.state.mn.us		
ADDRESS 320 W 2nd St, 6th Floor		CITY Duluth		ZIP CODE 55802

2. County or tribal client access contact

Who is your lead person/s who has contact with families receiving CCAP? You may have more than one client access contact.

<input type="radio"/> Mr. <input type="radio"/> Mrs. <input checked="" type="radio"/> Ms.	FIRST NAME Amanda	LAST NAME Yates		
TITLE Administrative Assistant I		PHONE NUMBER 218-726-2132	EXTENSION	FAX NUMBER 218-733-2976
EMAIL ADDRESS yatesa@stlouiscountymn.gov		SIR EMAIL ADDRESS X169970@cty.dhs.state.mn.us		
ADDRESS 320 W 2nd Street, 6th Floor		CITY Duluth		ZIP CODE 55802

3. Management of waiting list contact

Who is your waiting list contact person? The waiting list contact person identified is responsible for maintaining the waiting list and responding to the state's questions about families reported on the waiting list. Only identify one waiting list contact.

<input type="radio"/> Mr. <input type="radio"/> Mrs. <input checked="" type="radio"/> Ms.	FIRST NAME Amanda	LAST NAME Yates		
TITLE Administrative Assistant I		PHONE NUMBER 218-726-2132	EXTENSION	FAX NUMBER 218-733-2976
EMAIL ADDRESS yatesa@stlouiscountymn.gov		SIR EMAIL ADDRESS X169970@cty.dhs.state.mn.us		
ADDRESS 320 W 2nd Street, 6th Floor		CITY Duluth		ZIP CODE 55802

4. Provider billing contact

Who is your lead billing contact person who is able to answer questions about billing and payments? Only identify one provider billing contact.

<input type="radio"/> Mr. <input type="radio"/> Mrs. <input checked="" type="radio"/> Ms.	FIRST NAME Lisa	LAST NAME King		
TITLE Business Services Supervisor		PHONE NUMBER 218-726-2153	EXTENSION	FAX NUMBER
EMAIL ADDRESS kingl@stlouiscountymn.gov		SIR EMAIL ADDRESS		
ADDRESS 320 W. 2nd Street, 4 W		CITY Duluth		ZIP CODE 55802

5. Provider registration contact

Who is your lead provider registration contact person who is able to answer questions about provider registrations? Only identify one provider registration contact.

<input type="radio"/> Mr. <input type="radio"/> Mrs. <input checked="" type="radio"/> Ms.	FIRST NAME Briana	LAST NAME Lind		
TITLE Information Specialist II		PHONE NUMBER 218-726-2064	EXTENSION	FAX NUMBER 218-733-2992
EMAIL ADDRESS lindb@stlouiscountymn.gov		SIR EMAIL ADDRESS X1694BL@cty.dhs.state.mn.us		
ADDRESS 320 W. 2nd Str.		CITY Duluth		ZIP CODE 55802

6. LNL provider monitoring contact

Who is the lead contact person in the agency who is able to answer questions about LNL annual monitoring visits? Only provide one monitoring contact.

<input type="radio"/> Mr. <input type="radio"/> Mrs. <input checked="" type="radio"/> Ms.	FIRST NAME Susan	LAST NAME Sauls		
TITLE Social Services Supervisor		PHONE NUMBER 218-726-2108	EXTENSION	FAX NUMBER 218-733-2982
EMAIL ADDRESS saulss@stlouiscountymn.gov		SIR EMAIL ADDRESS X16940U@cty.dhs.state.mn.us		
ADDRESS 320 W. 2nd Str		CITY Duluth		ZIP CODE 55802

D. Subcontracted services

Counties and tribes may contract with an agency to administer all or part of their Child Care Assistance Program.

Minnesota Rules, part 3400.0140, subpart 7

If you are planning any changes in the administration of your CCAP, tell your CCAP policy specialist immediately. This could involve subcontracting or mergers of counties. Failing to notify DHS may delay the changes that you are planning to make.

Does your county or tribe contract with an agency for any part of the administration of CCAP? ☐ Yes ☒ No

Do not include cooperative agreements with employment and training service providers that work with MFIP/DWP families to develop and approve the employment service plan.

II. Collaboration and outreach

A. How do you share information about the Child Care Assistance Program so that individuals, child care providers, social service agencies, etc. are aware of child care assistance? ([Minnesota Rules, part 3400.0140, subpart 2](#))

Basic information about CCAP program and contact information is posted on the St Louis County website. Information is shared daily via paper, email, verbal, in person and web/online. Child Care Aware provides regional information dissemination. Child care pamphlets and packets are available at all four county offices, during regular business hours. Child care staff participate in community events and fairs, as invited, and have presented at the IRRB, school districts and other venues. The child care team is scheduled to host a CCAP specific session and participate in the Public Assistance 101 session at the 2020 St. Louis County PHHS conference (which has over 2500 participants). SLC has a dedicated information telephone number to which a "Worker of the Day" is assigned Monday - Friday.

B. Agencies are required to work with other public and private community resources that provide services to families to maximize community resources for families with young children. These other resources include, but are not limited to, Child Care Aware, School Readiness, Early Learning Scholarships, Head Start, and Early Childhood Screening. List the community programs your agency works with. ([Minnesota Statute, section 119B.08, subdivision 3 \(1\)](#))

We have representation with collaborative programs in Lutheran Social Services, Early Childhood Inter-agency Collaborative such as THRIVE, and Early Childhood Mental Health Review Team. In addition, collaborative efforts occur via interdepartmental and inter-agency collaborative with Public Health, Workforce Centers, St. Louis County Minor Parent committee Duluth Partnership on Child Care, and the Duluth Workforce Development Board. We actively engage with community programs and agencies that reach out to us, so this list will change over the course of the 2020-2021 biennium. Private, public and non-profit agencies have SLC's childcare brochures to provide to the general public.

C. How do you work with the community based programs and service providers identified above to maximize public and private community resources for families with young children? Include in this description the methods used to share information, responsibility, and accountability among these service and program providers as you work to foster collaboration among agencies and other community-based programs that provide flexible, family-focused services to families with young children and to facilitate transition into kindergarten.

A child care supervisor attends the Duluth Partnership on Child Care meetings with other services and nonprofits including Northland Foundation, LISC, Duluth city councilmen and child care providers. We also work with our internal Planning Resource and Organizational Development group (PROD) to coordinate needed services with external resources.

D. Copies of the proposed plan must be made reasonably available to the public, including those interested in child care policies such as parents, child care providers, culturally specific service organizations, Child Care Aware of Minnesota agencies (child care resource and referral), interagency early intervention committees, potential collaborative partners and agencies involved in the provision of care and education to young children. **You must allow time for public review and comment prior to submitting this plan to DHS for approval.** ([Minnesota Statute, section 119B.08, subdivision 3 \(2\)](#)).

1. Describe your procedures and methods to make copies of the **draft plan** reasonably available to the public.

The draft will be posted on the St Louis County Website. Paper Copies available upon request.

2. When was your draft plan available for public review?

August 14th through the DHS approval of the plan. We will respond to comments and concerns as they are submitted.

E. After your plan is approved by DHS, do you post your approved county/tribal plan on your website? ☒ Yes ☐ No

III. Eligibility

A. Education plans outside an Employment Plan

Prior to completing this section, please review [Minnesota Rules, part 3400.0040](#) and [Minnesota Statutes 119B.10 Subdivision 3](#) in their entirety to ensure your policies are in compliance.

1. High school diploma/GED high school equivalency diploma

1a. Do you approve all high school and GED programs? ☒ Yes ☐ No

2. Remedial and basic skills courses (includes Adult Basic Education and English as a Second Language)

2a. Do you approve all remedial and basic skills courses? ☒ Yes ☐ No

3. Post-secondary programs

3a. Describe your criteria and procedures for approving a post-secondary program outside an Employment Plan that will lead to employment.

The PRI completes a "Request for Child Care Assistance for Training/Education" SLCPHHS#2202 form (Attachment A). It requires the name of the school, the occupation and degree being sought, the dates that school begins and anticipated completion date to determine approximate length of time BSF will be needed, and whether they are currently enrolled. The request also requires the parent to do some research as to the employability and wages of the graduates in that occupation. Their education history provides the eligibility factor of whether they have completed a post-secondary degree before or if this is part of an ongoing education plan. Identifying any previous post-secondary education also indicates whether there was any previous scholastic probation or issues. We would allow BSF to be utilized if it is for course work required for maintaining a professional license. Approval or denial of the plan are indicated on the form and also case noted in MEC2.

BSF CCAP Education Plans are approved by the CCAP worker, if the applicant's information is complete and is a standard request. If the CCAP worker has concerns or questions about the plan, it will be discussed with CCAP co-workers and/or supervisor to determine if more information is necessary, or to help decide whether to approve or deny.

Families in the transition year are eligible for BSF funds for education.

3b. Identify the factors that contribute to the above criteria (for example: the availability of jobs where family resides or intends to reside, wage data, job placement rates in field of study).

Completion of an education program will likely lead to higher-wage employment compared to the PRI's current wages or recent history. At a minimum, the chosen field should allow a family to increase their income above the poverty level, for that family's household size. The following criterion must be met: PRI must verify enrollment into an accredited post-secondary school. If the parent is already enrolled in the program, they must be making satisfactory progress towards completion of the program as documented by the standards of the educational institution.

4. Changes to education plans outside an Employment Plan

4a. Do you have a different approval policy if a participant requests a change to their education plan? ☐ Yes ☒ No

B. Basic Sliding Fee Waiting List management

1. Priorities for service

Have you established sub-priorities for the fifth priority Basic Sliding Fee waiting list beyond those required in [Minnesota Statute, section 119B.03, subdivision 4](#)?

☒ Yes ☐ No

Identify the additional priorities and rationale for determining those additional priorities. ([Minnesota Rules, part 3400.0140, subpart 10](#))

- 5) Single parents, including single relative caretakers, employed 20 hours per week. Single Parents participating in approved job search activities;
- 6) Two-parent families in which both parents are employed a minimum of 20 hours a week;
- 7) Single parent full time post-secondary students not employed or employed less than 20 hours a week;
- 8) Two parent families in which one parent works a minimum of 20 hours per week and one parent is a full time post-secondary student;
- 9) Two Parent families with combinations of job search and post-secondary activities or two parent families in which both are in job search activities.

2. Six month review of Basic Sliding Fee Waiting List

CCAP Policy Manual,
Chapter 4.3.12.12

Minnesota Statute, section
119B.03, subdivision 2

2a. Statute requires that you review and update your waiting list at least every six months. How are families notified of this six month review? Describe your agency's process for reviewing and updating the waiting list. Please include your agency's six month review letter in Section IX.B. If your agency does not currently have a waiting list, describe your process in the event your agency does start a waiting list.

Parents will be notified every 6 months. The notification will include the request for the parent to continue to update their status of need and to respond within 30 days of notification. This allows parents to remove their names at their request and allows the agency to determine that their eligibility criteria has ended. When a family reaches the top of the waiting list and could be added, an application will be sent to the family. A family is removed from the waiting list when the county receives a completed application. If no application is received, the family is removed at the end of the time period allowed for returning the application. The notice sent with the application informs the family that their name will be removed from the waiting list in the event no application is submitted to the county agency.

2b. When families are removed from the waiting list for not responding to the six month review are they sent an additional notice or does the six month review letter include notification they will be removed from the waiting list if they do not respond?

On update notifications, parents are informed they have 30 days to respond or they will be removed from the waiting list. If the parent has made it to the top of the list and has been sent an application, and no application is received by the county agency, the family is removed at the end of the time period allowed for returning the application. The notice sent with the application informs the family that their name will be removed if no application is received by the agency. Both the update notification and the application letter will inform the client that they will be removed from the waiting list if they do not respond in the designated amount of time.

3. Applications mailed to families on the Basic Sliding Fee Waiting List

Applications must be sent to families on the waiting list when there is funding available for Basic Sliding Fee. When do you remove the family from the waiting list?

- ☐ Family is removed from the waiting list when the application is sent to the family. The notice sent with the application informs the family that their name has been removed from the waiting list.
- ☒ Family is removed from the waiting list when you receive the completed application. If no application is received, the family is removed at the end of the time period allowed for returning the application. The notice sent with the application informs the family that their name will be removed from the waiting list if the application is not received by the deadline.

3. Temporarily ineligible families on the Basic Sliding Fee Waiting List

When a family reaches the top of the waiting list and is temporarily ineligible for child care assistance, leave the family at the top of the waiting list for a period of time not to exceed 90 calendar days, according to priority group and serve the applicant who is next on the waiting list unless an alternative procedure is provided in the agency's plan.

Minnesota Rules, part
3400.0040, subpart 17

Minnesota Rules, part
3400.0060, subpart 6

Are there exceptions to the 90 day policy that extends the timeframe for a family who has reached the top of the waiting list and is temporarily ineligible?

- ☐ Yes ☒ No

C. Child care for school release days

1. How do case workers authorize care for school release days in your agency?

- ☐ Authorize actual hours needed and increase or decrease hours based on known school release days.
- ☐ Authorize the hours care is needed when there are no school release days.
- ☒ Authorize the highest number of hours care is needed with the provider.
- ☐ Other method.

CCAP Policy Manual,
Chapter 9.1.3

2. How do you communicate scheduled and authorized hours to parents, providers and billing workers?

Add a comment to the notice identifying what the schedule is, and what authorized hours are approved.

D. Child care for families with flexible schedules

1. How do case workers authorize care for families with flexible schedules in your agency?

CCAP Policy Manual,
Chapter 9.1.6

- ☒ Authorize the typical number of hours needed and when the schedule requires additional care, the provider bills for the additional care.
- ☐ Authorize the minimum number of hours care is needed and when the schedule requires additional care, the provider bills for the additional care. Payment is made by increasing the number of hours listed in the "total hours of care authorized" field on the billing window or by creating a new Service Authorization.
- ☐ Authorize the highest number of hours care is needed with the provider. The provider is expected to bill only for the time that care is needed.
- ☐ Other method.

2. How do you communicate scheduled and authorized hours to parents, providers and billing workers?

Add a comment to the Service Authorization notice identifying what the schedule is and what authorized hours are approved.

E. Authorizing care for clients with Employment Plans

Job counselors and CCAP workers must communicate child care needs for clients with Employment Plans.

Guidance is found in [CCAP Policy Manual, Chapter 9.1.5](#).

1. CCAP workers must obtain an activity schedule or the days and times that child care is needed. Who is responsible for obtaining the schedule information from the client?

- ☐ Job counselor provides schedule or days and times that child care is needed to CCAP worker.
- ☐ CCAP worker obtains schedule from client.
- ☒ Other method.

How do CCAP workers receive schedule information for Employment Plan activities?

Employment Counselors are required to submit the DHS 7054. CCAP workers will use 7054 if provided, or work schedule if provided.

2. How do you communicate required information between job counselors and CCAP workers (email, fax, case notes, verbal, DHS-7054, etc.)?

Communication includes email, fax, case notes, phone calls, Status Updates and 7054s.

IV. Provider compliance policies

A. Reasons for closing a provider's registration

[Minnesota Statutes, section 119B.13, subdivision 6\(d\)](#) allows counties and tribes to refuse to issue a child care authorization, revoke an existing authorization for a provider, stop payment, or refuse to pay a bill under circumstances described in the six clauses below. Counties and tribes must indicate which clauses they will include in their plan, and must apply the policies consistently to providers.

CCAP Policy Manual,
Chapter 9.3

CCAP Policy Manual,
Chapter 14

- An agency cannot implement these policies without establishing them in their plan.
- An agency must notify their CCAP Policy Specialist at least 10 days prior to closing a provider's registration or taking any other action to enforce any of these policies, except clause 4 when notified by DHS.
- An agency that does not implement these policies may still pursue a fraud disqualification for a provider. These policies can be used in addition to, or in combination with, a fraud disqualification.

Does your agency plan to disqualify providers for reasons listed in Minnesota Statutes, section 119B.13, subdivision 6(d)? ☒ Yes ☐ No

Which clause(s) does your agency plan to implement? Check all that apply.

☒ **Clause 1:** A provider admits to intentionally giving the agency materially false information on the provider's billing forms.

If you checked Clause 1, your agency must also pursue, at minimum, a disqualification and establishment of an Intentional Program Violation (IPV) using the Administrative Disqualification (ADH) process described in Chapter 14 of the CCAP Policy Manual. The agency should consider pursuing a fraud determination through other means described in section 14.12.6 in the CCAP Policy Manual. There also may be overpayments charged to the provider applied to time periods when Clause 1 occurred.

When enforcing this clause, you have the option to use MEC² generated notices or DHS optional notices to notify providers and/or families. The DHS optional notice to families communicates they are still eligible for CCAP. The DHS optional notice to providers gives specific information on why their registration closed and, according to policy, does not include provider appeal rights. Contact your CCAP Policy Specialist for samples of the DHS optional notices and instructions on how to use the notices.

What type of notice will you send to families? ☐ MEC² generated notices ☒ DHS optional notices

What type of notice will you send to providers? ☐ MEC² generated notices ☒ DHS optional notices

Note: If your agency uses DHS optional notices, add the optional notice(s) to Section IX.B and if the document(s) have not yet been approved by DHS, submit with this plan for review and approval. You must also close the provider's registration in MEC². Contact your CCAP Policy Specialist for system instructions.

☒ **Clause 2:** The agency finds a preponderance of evidence that the provider intentionally gave the agency materially false information on the provider's billing forms or attendance records.

If you checked Clause 2, your agency must also pursue, at minimum, a disqualification and establishment of an Intentional Program Violation (IPV) using the Administrative Disqualification (ADH) process described in Chapter 14 of the CCAP Policy Manual. The agency should consider pursuing a fraud determination through other means as described in section 14.12.6 in the CCAP Policy Manual. There also may be overpayments charged to the provider applied to time periods when Clause 2 occurred.

When enforcing this clause, you have the option to use MEC² generated notices or DHS optional notices to notify providers and/or families. The DHS optional notice to families communicates they are still eligible for CCAP. The DHS optional notice to providers gives specific information on why their registration closed and, according to policy, does not include provider appeal rights. Contact your CCAP Policy Specialist for samples of the DHS optional notices and instructions on how to use the notices.

What type of notice will you send to families? ☐ MEC² generated notices ☒ DHS optional notices

What type of notice will you send to providers? ☐ MEC² generated notices ☒ DHS optional notices

Note: If your agency uses DHS optional notices, add the optional notice(s) to Section IX.B and if the document(s) have not yet been approved by DHS, submit with this plan for review and approval. You must also close the provider's registration in MEC². Contact your CCAP Policy Specialist for system instructions.

☐ **Clause 3:** A provider is in violation of Child Care Assistance Program rules, until the agency determines the violations have been corrected.

☒ **Clause 4:** A provider is operating after receipt of a licensing order of suspension or revocation (this occurs when providers are appealing the revocation or suspension) or a final order of conditional license, for as long as the conditional license is in effect.

Note: Agencies do not have the option to close registrations of providers operating with conditional licenses.

If you choose this option, DHS will send you a list once a month to inform you of providers in this category. You may act sooner if you learn of this licensing status through your licensors, etc. Contact your CCAP Policy Specialist if you are planning to take action prior to receiving the monthly DHS listing.

What licensing violations are subject to this clause?

Providers with a suspended license? ☒ Yes ☐ No

When applying this clause for a provider with a suspended license, what provider types will you apply the clause to?

☐ Licensed family child care ☐ Licensed centers ☒ Both

Providers with a revoked license? ☒ Yes ☐ No

When applying this clause for a provider with a revoked license, what provider types will you apply the clause to?

☐ Licensed family child care ☐ Licensed centers ☒ Both

When enforcing this clause, you have the option to use MEC² generated notices or DHS optional notices to notify providers and/or families. The DHS optional notice to families communicates they are still eligible for CCAP. The DHS optional notice to providers gives specific information on why their registration closed and, according to policy, does not include provider appeal rights. Contact your CCAP Policy Specialist for samples of the DHS optional notices and instructions on how to use the notices.

What type of notice will you send to families? ☐ MEC² generated notices ☒ DHS optional notices

What type of notice will you send to providers? ☐ MEC² generated notices ☒ DHS optional notices

Note: If your agency uses DHS optional notices, add the optional notice(s) to Section IX.B and if the document(s) have not yet been approved by DHS, submit with this plan for review and approval. You must also close the provider's registration in MEC². Contact your CCAP Policy Specialist for system instructions.

- ☒ **Clause 5:** A provider submits false attendance reports or refuses to provide documentation of the child's attendance upon request.

How will your agency determine the provider has corrected the condition?

St. Louis County Public Health and Human Services has the right to refuse to pay a bill, revoke child care authorization, and refuse to issue a child care authorization to a provider that submits false reports or refuses to provide documentation of a child's attendance upon request. Per 2019 MN Legislative Session providers attendance record-keeping requirements must keep records accurate and legible, that records not provided at the time of request are inadmissible if offered as evidence in future proceedings went into effect July 1, 2019.

A Fraud referral will be made to the appropriate entity.

The Agency will follow the direction provided by the SLC County attorney's office/DHS OIG's office per fraud investigation determination. The condition will be considered corrected when the SLC County attorney/DHS OIG office notifies the eligibility/provider worker that it has been resolved.

St. Louis County will notify DHS CCAP at least 10 days in advance anytime the county plans to close a provider's registration citing Minn. Stat. §119B.13, subd. 6(d) (with the exception of clause 4). See CCAP Policy Manual, Chapter 9.3, Payment to providers.

Your agency may withhold payment for a period of up to three months beyond the time the condition has been corrected.

Will you apply a penalty period beyond when the condition is corrected? ☐ Yes ☒ No

When enforcing this clause, you have the option to use MEC² generated notices or DHS optional notices to notify providers and/or families. The DHS optional notice to families communicates they are still eligible for CCAP. The DHS optional notice to providers gives specific information on why their registration closed and, according to policy, does not include provider appeal rights. Contact your CCAP Policy Specialist for samples of the DHS optional notices and instructions on how to use the notices.

What type of notice will you send to families? ☐ MEC² generated notices ☒ DHS optional notices

What type of notice will you send to providers? ☐ MEC² generated notices ☒ DHS optional notices

Note: If your agency uses DHS optional notices, add the optional notice(s) to Section IX.B and if the document(s) have not yet been approved by DHS, submit with this plan for review and approval. You must also close the provider's registration in MEC². Contact your CCAP Policy Specialist for system instructions.

☒ **Clause 6:** A provider gives false child care price information.

How will your agency determine the provider has corrected the condition?

A provider is in violation if they charge CCAP families a higher rate than non-CCAP families and when the provider signs the provider Registration and Acknowledgement form they acknowledge that doing so or wrongfully obtaining child care will be investigated and the provider may be charged with a crime.

St. Louis County requires providers to submit copies of their billing policies to the agency at authorization and anytime a provider updates their billing and payment policies.

St. Louis County Public Health and Human Services will review billings that are submitted and compare the rates as listed by the provider. St. Louis County Public Health and Human Services may revoke the provider's authorization and stop payment.

The provider will be required to resubmit new billing forms with the same rates charged to the Non-CCAP families.

To demonstrate compliance with the above requirements, the provider must submit a signed statement that they understand and will follow the requirement(s) in the future.

If the county makes the decision to close a provider registration and a provider corrects a requirement prior to the end of the 15-day notice period, then the registration will be reinstated.

If a provider corrects a requirement after their registration closes, then they must re-register using the appropriate Provider Registration form DHS-7195 or DHS-5190-92 and submit for approval.

Your agency may withhold payment for a period of up to three months beyond the time the condition has been corrected.

Will you apply a penalty period beyond when the condition is corrected? ☐ Yes ☒ No

When enforcing this clause, you have the option to use MEC² generated notices or DHS optional notices to notify providers and/or families. The DHS optional notice to families communicates they are still eligible for CCAP. The DHS optional notice to providers gives specific information on why their registration closed and, according to policy, does not include provider appeal rights. Contact your CCAP Policy Specialist for samples of the DHS optional notices and instructions on how to use the notices.

What type of notice will you send to families? ☐ MEC² generated notices ☒ DHS optional notices

What type of notice will you send to providers? ☐ MEC² generated notices ☒ DHS optional notices

Note: If your agency uses DHS optional notices, add the optional notice(s) to Section IX.B and if the document(s) have not yet been approved by DHS, submit with this plan for review and approval. You must also close the provider's registration in MEC². Contact your CCAP Policy Specialist for system instructions.

☐ **Clause 7:** A provider fails to report decreases in a child's attendance. A provider must report to the county on the billing form when a child's attendance in child care falls to less than half of the child's authorized hours or days for a four-week period.

B. Notification to providers

Your agency must notify all currently registered providers and any new providers wishing to register with your agency of the provider compliance clause(s) being implemented. Notification options include:

- Sending a mailing to all providers registered with your agency.
- Adding information to your agency's provider registration packets.

How will you notify providers about the provider compliance clauses your agency is choosing to implement? Add the notification document(s) to Section IX.B and if the document(s) have not yet been approved by DHS, submit with this plan for review and approval.

This information is included in all new provider and family packets. Any current providers will receive a mailing of the updated plan once approved by DHS.

Note: This notice differs from the adverse action notice your agency sends when closing an individual provider's registration under these clauses.

V. Policies applicable to legal nonlicensed (LNL) providers

A. Unsafe care

An agency may deny authorization as a child care provider to any applicant or rescind authorization of any provider when the agency knows or has reason to believe that the provider is unsafe or that the circumstances of the chosen child care arrangement are unsafe. See [Minnesota Statute, section 119B.125, subdivision 4](#). When a provider's authorization is rescinded due to unsafe care, the agency must close the provider's registration with a 15 calendar day notice. If there is also an imminent risk of harm to the health, safety or rights of the child(ren) in care with a legal nonlicensed provider, child care authorization must be terminated immediately.

The department has identified that when substantiated maltreatment occurred in a legal nonlicensed care setting related to an incident where a child died or was seriously injured, the child care setting is considered unsafe care. A serious injury is one that requires treatment by a physician.

What other conditions of unsafe care does your agency apply to legal nonlicensed (LNL) providers or legal nonlicensed care arrangements **beyond those contained in Minnesota Statute, sections 245C.14 or 245C.15?**

Unsafe Care Criteria

Legal Non-licensed Providers

1. For reasons which reflect on the provider's ability to give care, the provider has had a felony level conviction within the past 15 years involving the use, dissemination, sale or possession of alcohol, drugs or other controlled substances or the conspiracy to do the same; or the provider has admitted, or a preponderance of the evidence indicates, that the provider committed such an offense within the past 15 years.
2. For reasons which reflect on the provider's ability to give care, the provider has lost parental rights to a child through an order involuntarily terminating the provider's parental rights, or a child of the provider has been the subject of an order involuntarily transferring permanent legal and physical custody of the child to a relative under Minn. Stat. ' 260C.201, subd. 11(e)(1), or a similar law of another jurisdiction.
3. A responsible social services agency has determined, or a preponderance of the evidence indicates, that the provider has subjected a child to egregious harm as defined by Minn. Stat. ' 260C.007, subd. 14.
4. Voluntary or court ordered placement of a provider's child out of the provider's home within the past two years for reasons which reflect on the provider's ability to provide care.
5. The residence or facility where the child care would be provided is not in compliance with State or local health or

building code regulations such that, in the opinion of the County, the health or safety of children in the residence could be in jeopardy.

6. Documentation or other credible evidence of substantial, unsanitary conditions in the provider's home (i.e., such as clutter that inhibits free movement in the home, un-disposed pet or other urine or feces, uncontained garbage, etc.) within the past five years.

7. Documentation or other credible evidence of the presence of a methamphetamine lab in the provider's residence within the past seven years.

8. Documentation or other credible evidence of weapons, ammunition or illegal drugs which may have been or accessible to children in the residence within the past seven years.

9. Dangerous, uncontrolled animals on the provider's property or in the provider's residence.

10. Documentation or other credible evidence of recurring child neglect by the provider, other than educational neglect, within the last seven years.

11. Involuntary judicial commitment of the provider within the past two years.

12. Documentation or other credible evidence of repeated incidents of violent behavior within the past seven years.

13. For reasons which reflect on the provider's ability to give care, less than seven years has passed since the substantiated serious or recurring maltreatment by the person of a minor under Minn. Stat. ' 626.556, a vulnerable adult under Minn. Stat. ' 626.557, or serious or recurring maltreatment in any other state, the elements of which are substantially similar to the elements of sections 626.556 or 626.557 for which: (1) there is a preponderance of evidence that the maltreatment occurred, and (2) the subject was responsible for the maltreatment.

14. Documentation or other credible evidence that the person abuses prescription drugs or uses controlled substances as specified in Minnesota Statutes, Chapter 152, or alcohol, to the extent that the use or abuse has or may have a negative effect on the ability of the provider to give care or is apparent during the hours children are in care. Any such person must have 12 consecutive months of verified abstinence before authorization as a legal non-licensed provider.

15. Documentation or other credible evidence of illegal activities in the provider's residence or by the person which may place a child in a harmful situation (i.e., prostitution, illegal drug sales or use, etc.).

16. The presence of a known sex offender residing in the home where the child care is provided or who has access to the children.

17. The provider has received child protection services within the past five years, not including Family Assessment services; and the review of the record and assessments of the child protection staff assigned to the case provide a preponderance of evidence that the provider is unsafe or the circumstances of the child care arrangement are unsafe.

NOTE: The Consolidated Appropriations Act of 2018 (Public Law 115-141) prohibits states from expending federal CCDF funds on providers where a serious injury or death occurred due to substantiated health or safety violations.

B. Imminent risk

Some unsafe care conditions present an imminent risk for children in care. When there is an imminent risk of harm to the health, safety or rights of a child in care with a legal nonlicensed (LNL) provider, child care authorization must be terminated immediately. Agencies do not need to give the provider at least 15 calendar days notice. See [Minnesota Rules 3400.0035, subpart 5, clause E](#).

What conditions does your agency recognize as presenting an imminent risk to the health, safety or rights of a child in care with a legal nonlicensed provider?

If known to the agency, through complaint by parent/family member/public, it would go through the intake process in Child and Family Services. It may or may not be known that it is a legal nonlicensed provider.

Imminent risk danger to health and safety or rights of a child in care means that a child is threatened with immediate and present maltreatment that is life threatening or likely to result in abandonment, sexual abuse, or serious physical injury. [Minn. Admin. Rule 9560.0214, subp. 12]: and/or lack of supervision, unsafe sanitary or living conditions.

1. Police have responded to the home, made a determination that the children need to be taken into custody due to imminent risk of danger to their health and safety.
2. Child Protection Social Services have investigated the legal non-licensed provider and determined that the children have been found to be at imminent risk of danger and need to be removed for their health and safety.

C. Annual monitoring

Any legal nonlicensed (LNL) provider with an open Service Authorization for a child who is not related to them must have an annual monitoring visit. Related means the provider is the child's sibling, grandparent, great-grandparent, aunt, or uncle of the child, based on blood relationship, marriage or court decree.

1. How does your agency track legal nonlicensed providers who are registered with your agency and who have an open Service Authorization for unrelated children?

In Parent file MEC2 Member Details under Child's Provider tab

CCAP Eligibility workers will notify CCAP Provider registration worker that an unrelated LNL provider has been chosen by a family/guardian to provide care for their child/children. If Unrelated LNL provider is requiring registration, the CCAP Provider worker will follow the process/procedures for registering a CCAP provider. If LNL provider is currently registered and is clear of any pending actions with social services/legal systems, CCAP provider worker will enter the unrelated LNL provider into the Unrelated Home monitoring Log with date service authorization will begin.

2. What are your agency's internal processes and procedures for completing monitoring visits?

Unrelated care provided to children in child care assistance Program

1. Parent/legal guardian applies for child care assistance (CCAP) and identifies a Legal Non Licensed (LNL) provider who is unrelated to be their provider.
2. CCAP Eligibility worker notifies CCAP Provider worker of unrelated LNL.
3. **Unrelated LNL contacts CCAP Provider worker to start registration process. During Registration process and in orientation packet, unrelated LNL is informed that there will be a monitoring visit within one year of the start of their providing service to the child/children.
4. Unrelated LNL and other adults and 13 year olds and older must successfully pass a background study. If provision of service is in child/children's own home, CCAP eligibility worker will need to inform CCAP Provider worker of this special arrangement.
5. Unrelated LNL must complete the required training before a Service Arrangement can be opened for payment.
6. When LNL is cleared to start services, CCAP Provider worker will inform the Family Child Care Licensing (CCL) staff so that they can determine who will take the LNL and schedule monitoring visit within a year's time limit.
7. CCL will send LNL a letter of introduction, Bulletin 18-68-22 Child Care Assistance Program legal nonlicensed (LNL) provider requirements dated 8-24-2018, and any other useful information that can be provided to the LNL. Within

the letter the CCL will explain that they will be contacting the LNL within the next year to make a home monitoring visit. If the LNL is providing care in the child/children's home, the monitoring visit will occur in the child's home.

8. During the year time span, CCL will confirm that LNL is still active. Then CCL will send a second letter to set up a monitoring visit.

9. CCL will allow 15 days from date of letter for response from LNL.

10. If LNL responds, monitoring visit is scheduled and CCL completes visit. If LNL meets all requirements, CCL Submits Summary form to DHS.

11. If LNL does not respond in 15 days, a courtesy call will be made. CCL staff will notify CCAP eligibility worker to have a 15 day adverse action notice sent to the LNL provider that the SA will be closing. Still no response, SA for unrelated child will be closed.

12. During a monitoring visit, the CCL staff will be utilizing the CCAP LNL Provider Monitoring Checklist DHS-7867. The provider is required to meet, correct on site, submit correction to agency to meet requirement, or meet at later date for each of the required Health and safety categories.

13. If provider does not demonstrate full compliance with health and safety policies at a visit, the agency will:

a. If all out-of-compliance factors can be demonstrated by submitting additional written information, send a notice to the LNL provider informing them of what information must be submitted. If all information is not submitted within 15 days, CCL staff will notify CCAP Provider worker to close the LNL provider's registration with a 15-day notice.

b. If at least one out-of-compliance factor cannot be demonstrated by submitting additional written documentation, CCL staff will notify CCAP Provider worker to close the LNL provider's registration with a 15-day notice.

c. When the CCL performs the annual monitoring visit and observe issues that meet the definition of imminent risk, the LNL provider's registration will immediately be closed. 15-day notice is not required for imminent risk situations.

3. If a provider does not show compliance with an annual monitoring visit, under what conditions can they receive CCAP payments in the future?

☒ Only if the provider is licensed

☐ The provider must show compliance with another monitoring visit

☐ Other

D. Complaints and incidents

1. Records of substantiated parental complaints

Within 24 hours of receiving a complaint concerning the health or safety of children under the care of a legal nonlicensed (LNL) provider, an agency must relay the complaint to the agency's child protection agency, county public health agency, local law enforcement, and/or other agencies with jurisdiction to investigate complaints. Information regarding substantiated complaints must be released following applicable data privacy laws. See [Minnesota Statutes Chapter 13](#). When a report is substantiated, see Minnesota Rules, part 3400.0140, subpart 6, for record retention and provider payment policies.

When complaints are substantiated how do you:

1a. Maintain these records?

If a complaint comes into CCAP staff, it will be submitted to the appropriate authorities for further investigation. 24 hour response is determined by the State of Minnesota Child Maltreatment Intake, Screening and Response Guidelines; DHS-5144 which are based off MN Stat. 626.556, Reporting of Maltreatment of Minors Act.

As to the determination of a substantiated complaint, Records are maintained within a child protection investigation file which are closed until an investigation is completed.

If the lead investigation is through law enforcement, no further information is available to CCAP until the investigation is completed.

1b. Make this information available to the public when requested?

Data Practices will be followed as per data practice rules. MN Stat. 13.03 Access to Government Data.

2. Aggregate reporting of incidents

At least quarterly, agencies must report to the Minnesota Department of Human Services the aggregate number of deaths, serious injuries, and substantiated maltreatment incidents for children under the care of legal nonlicensed (LNL) providers.

How will you record and maintain accurate counts of incidents that occur in legal nonlicensed settings registered by your agency?

Report information will be maintained by Provider Worker. Quarterly reports are submitted to: Submit information directly to your DHS policy specialist or to the department via email (DHS.CCAP@state.mn.us) or fax (651-431-7483).

VI. Special needs rates

Special needs rates, above the standard maximum rates, can be paid to providers if approved by the commissioner of DHS (up to the provider's charge).

Minnesota Statute,
section 119B.13,
subdivision 3

Minnesota Rules,
part 3400.0130,
subpart 3

CCAP Policy
Manual,
Chapter 9.54

A. Special needs rates for children in at-risk programs

You may choose to pay special needs rates to certain populations defined as "at-risk" in your County and Tribal Child Care Fund Plan. At-risk means environmental or familial factors exist that could create barriers to a child's optimal achievement. This could include, but is not limited to: a federal or state disaster, limited English proficiency in a family, history of abuse or neglect, a determination that the children are at risk of abuse or neglect, family violence, homelessness, age of the mother, level of maternal education, mental illness, development disability, parental chemical dependency or history of other substance use.

1. Do you pay a special needs rate for at-risk populations? ☐ Yes ☒ No

If this information changes, including additional population groups identified by your agency, new facilities, or a proposed change in rates paid, DHS must approve the change. Submit a request to amend your plan. This information will be used during case audits.

B. Special needs rates for care of sick children

You may choose to pay special needs rates for the care of sick children. Special needs rates for care of sick children apply to rates paid above the standard maximum rates to a provider that cares for sick children. You must have DHS approval for these rates to be paid.

Minnesota Rules, part
3400.0110, subpart 8

1. Do you pay a special needs rate for care of sick children?

☒ Yes ☐ No

If yes, identify the provider type, rate(s) approved, rate schedule and the approved rate begin date for each special need rate currently paid above the standard maximum rate when care is for a sick child. **Do not attach client-specific information to this plan.**

Provider type	Rate by age category	Rate schedule	Approved rate begin date
LNL	\$244.5	Week	4/8/2019
Licensed	\$295.78	Week	4/22/2019

VII. Payment policies

A. Provider registration renewal

How often do you renew a provider's registration?

- ☐ Yearly ☒ Every two years ☐ Other

Minnesota Statute, section
119B.125, subdivision 1

B. Payment to two providers when a child is sick

When a child is sick and being cared for by a second provider, do you pay both the regular provider that charges an absent day and the second provider that is caring for the child?

- ☐ Yes ☒ No

Minnesota Statutes,
section 3400.0110,
subpart 8

Note: If the rate paid for care of sick children exceeds maximum rates, the "rates for care of sick children" must be included in the special needs rates section of this plan.

C. Submission of invoices

If a provider receives an authorization of care and a billing form for an eligible family, the provider must submit the billing form to the agency within 60 days of the last date of service on the billing form. If the provider shows good cause for the delay you may pay bills submitted after 60 days.

Minnesota Statute, section
119B.13, subdivision 6

1. What is your **definition of good cause** for delay in submitting a billing form? Agency error must be included in this definition.

(1) Agency error both the provider and the counties (2) Computer system issues/errors (3) Delays in authorizations or retroactive authorizations (4) Delays due to natural disaster, flood, fire or blizzard (5) Documented medical conditions which prevented the provider from submitting bills on time (6) Other justifications as approved by the child care supervisors

All requests for payments after 60 days must be approved/signed by a supervisor.

2. Does your agency have any providers using MEC² PRO? ☐ Yes ☒ No

3. When is a provider signature not needed on a billing form?

If there is no time to be paid for child in care, or in the situation where the provider dies or is incapacitated (verification required)

4. Do you require the parent signature on the billing form? ☒ Yes ☐ No

4a. When is a parent signature not needed on a paper billing form?

If the parent has moved, changed daycares, stopped using the daycare, or is incarcerated or hospitalized, then the provider can submit a request for payment without parent signature. All requests for payment without a parent signature are reviewed and signed by a supervisor.

D. Underpayments

If you have underpaid according to Child Care Assistance Program policies, do you make corrective payments?

☒ Yes ☐ No

If yes, under what conditions do you make corrective payments? You may apply criteria such as a dollar amount or how far back the situation occurred.

Attempts are made to make corrective payments for all agency errors. Corrective payments for agency error will be made unless the system or accounting rules make it impossible.

In the event that the agency needs information in order to determine a corrective payment, that information must be submitted by the provider or client in a timely manner, or corrective payments will not be made.

Corrective payments will not be made for provider or client error.

E. Provider rates

Does your agency enter provider rates on MEC²? ☐ Yes ☒ No

How do you ensure that the rates billed by the provider are the same rates reported at registration? How are discrepancies resolved?

SLC requires that all providers send in written notice of their policies and rates, which are kept in the provider file. Updates occur when new rate policies/renewals are received from the provider and when new providers are added. Discrepancies are first handled by the provider specialist, billing clerk and clerical due to the possibility of an oversight by the provider. If the situation cannot be resolved at a lower level, the supervisor will work with the provider for resolution. St Louis County does not pay above the state maximum identified for our county. If the provider charges more than the maximum, it has to be in the policy the client signs acknowledging that they understand the client will be responsible for the difference.

F. Absent day policy

The Child Care Assistance Program limits the number of paid absent days for licensed child care providers and certified license-exempt centers. Payment may exceed absent day limit at the request of the provider and with the approval of the county or tribe, if at least one parent in the family:

Minnesota Statute,
section 119B.13,
subdivision 7

- Is under the age of 21; and
- Does not have a high school or general equivalency diploma; and
- Is a student in a school district or another similar program that provides or arranges for child care, parenting support, social services, career and employment supports, and academic support to achieve high school graduation.

Do you have any registered child care providers that meet these requirements? ☐ Yes ☒ No

VIII. Program integrity

A. Agency case management reviews can be used to determine causes of errors and identify specific policies needing review.

1. Do you conduct case management reviews of CCAP? ☐ Yes ☒ No

2. Do you conduct case management reviews of CCAP providers? ☐ Yes ☒ No

IX. Other information

A. Additional agency optional policies

Do you have any other policies that apply to the Child Care Assistance Program which are not specifically required by state or federal rule or law? ([Minnesota Rules, part 3400.0140, subpart 1](#)) ([Minnesota Rules, part 3400.0150, subpart 2](#))

No.

B. Agency developed forms

- All agency developed forms and notices used for CCAP must reflect current policy and be approved by DHS.
- Counties and tribes must use forms developed by DHS for administration of CCAP.
- Agency developed forms must not duplicate or replace DHS forms.
- Local agencies may create supplemental forms subject to DHS approval.
- Forms must be written using plain language standards and meet other communication guidelines.
- Review forms, notices and documents at least every two years to ensure they reflect current CCAP policy and laws.

Forms inventory for your agency

Use this table to list all agency developed forms, notices, and documents your agency uses to administer child care assistance.

Only new and/or revised forms, notices, or written documents that have not been previously approved must be submitted with this plan for DHS approval.

Note: Refer to the DHS memo announcing this plan for a list of DHS created documents required for CCAP. Do not list or submit DHS created documents.

Name of agency developed form	Form reflects current CCAP policy	Status of current form
	<input type="checkbox"/> Agency assures compliance	<input type="checkbox"/> DHS previously approved - no changes <input type="checkbox"/> DHS previously approved - revised and needs DHS approval <input type="checkbox"/> New form - needs DHS approval

X. County and tribal assurances

Check the designated boxes below to assure compliance.

A. The county or tribe is informing parents about the following as required under [Minnesota Rules, part 3400.0035, subpart 1](#).

- The documentation necessary to confirm eligibility for CCAP
- Waiting list information
- Application procedures
- The importance of prompt reporting of a move to another country to avoid overpayments and to increase the likelihood of continuing benefits

☒ **County or tribe assures compliance**

In addition, the agency uses the following:

"[Parent Acknowledgement When Choosing a Legal Nonlicensed Provider](#)" (DHS-5367) assures compliance with the following:

- Families rights and responsibilities when choosing a provider

"[Do You Need Help Paying for Child Care?](#)" (DHS-3551) assures compliance with the following:

- Federal and state child and dependent care tax credits
- Earned income credits

- Other services for families with young children required by state and federal laws
- Child Care Aware services
- Child Care Assistance Program eligibility requirements
- Family copayment fees and how computed
- Information about how to choose a provider
- Availability of special needs rates
- The family's responsibility for paying provider charges that exceed county maximum payments in addition to the family copayment fee

☒ **County or tribe assures compliance and uses DHS-5367 and DHS-3551**

B. The agency is distributing the following information to registered legal nonlicensed providers as required by:

[Minnesota Rules, part 3400.0140, subpart 5.](#)

Use of "[Health and Safety Resource List for Parents and Legal Nonlicensed Providers](#)" (DHS-5192A) assures compliance with the following:

- Child immunization requirements
- Child nutrition
- Child protection reporting responsibilities
- Health and safety information required by federal law
- Child development information
- Referral to Child Care Aware; and
- Resources and training options to meet federal and/or state-required health and safety topics

☒ **County or tribe assures compliance by use of DHS-5192A**

C. Child Care Assistance Program (CCAP) Tasks and Timeframes

The county or tribe must perform tasks and meet timeframes required to administer the Child Care Assistance Program. These tasks include, but are not limited to:

- Assessing CCAP eligibility
- Registering child care providers
- Processing payments

These tasks and timeframes are required under the Child Care and Development Fund (CCDF), 98.11(a)(3) Administration under Contracts and Agreements, Minnesota Statutes 119B, Minnesota Rules 3400, CCAP Policy Manual, and MEC² User Guide.

☒ **County or tribe assures compliance**

D. Child Care Assistance Program (CCAP) Funding

DHS releases a forecast twice each fiscal year (November and February) which includes the overall budget for the Child Care Assistance Program, including all child care subprograms and administrative dollars. The county or tribe is reimbursed administrative dollars as outlined in Minnesota Statutes 119B.15. In addition to receiving the Basic Sliding Fee allocation, the county or tribe contributes a fixed local match equal to that county's/tribe's calendar year 1996 contribution, as outlined in Minnesota Statutes 119B.11, Subd. 1.

The county or tribe is provided a calendar year Basic Sliding Fee allocation, published at least annually and based on the formula outlined in Minnesota Statutes 119B.03, Subd. 6. When there is not sufficient funding to serve all eligible non-MFIP families, the county or tribe manages the Basic Sliding Fee waiting list according to the priorities outlined in Minnesota Statutes 119B.03, Subd. 4.



County or tribe assures compliance

E. Child Care Assistance Program (CCAP) Reporting

The county or tribe is required to submit timely reports to the Department of Human Services. The reports include, but are not limited to:

- Basic Sliding Fee waiting list
- Override monitoring
- Basic Sliding Fee adjustments



County or tribe assures compliance

F. Limited English Proficiency Plan

The county or tribe has completed a Limited English Proficiency Plan, describing how it serves families with limited English Proficiency



County or tribe assures compliance